

TMH:jlb 6395-64907 207483.doc 07/21/03

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Total No. Pages: 15 including this cover sheet

Message: Transmitted herewith for filing in the above-identified application is a Preliminary Amendment. If you do not receive all pages or if you have problems receiving transmittal, please call Tanya M. Harding, Ph.D. at (503) 226-7391. The fee (large entity) has been calculated as shown below.

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In re application of: Chang

Application No.: 09/701,536

Filed: June 18, 2001

For: NUCLEIC ACID VACCINES FOR PREVENTION OF  
FLAVIVIRUS INFECTION

Examiner: Jeffrey S. Parkin

Art Unit: 1642

Date: July 21, 2003

## CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence and any documents referred to as being transmitted herewith are being facsimile transmitted to the Patent and Trademark Office via fax number (703) 308-4242 on July 21, 2003.

Tanya M. Harding, Ph.D.  
Attorney for Applicant

## FEE CALCULATION FOR CLAIMS AS AMENDED

For	No. after amendment	No. paid for previously	Extra	Rate	Fee
Total Claims	42	- 34* =	8	\$18.00	\$144.00
Indep.	1	- 4** =	0	\$84.00	\$ 0.00
TOTAL FEE FOR THIS AMENDMENT					\$144.00

\*greater of twenty or number for which fee has been paid. \*\*greater of three or number for which fee has been paid.

- ☒ A copy of the Substitute Power of Attorney submitted on March 25, 2003, is enclosed, along with a copy of the postcard acknowledging receipt by the PTO on April 1, 2003.
- ☒ Please charge this fee and any additional fees that may be required in connection with filing of this Preliminary Amendment to Deposit Account 02-4550.

Tanya M. Harding, Ph.D.  
Registration No. 42,630  
cc: Docketing

July 21, 2003  
Date

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CLIENT/MATTER NO. 6395-64907 ATTY/SEC TMH:jlb  
 INVENTOR(S): Chang  
 APP. NO. 09/701,536 FILING DATE 11-19-00  
 The following, due \_\_\_\_\_, mailed 3-25-03  
 by First Class Mail, was received in the U.S. PTO on the date stamped hereon:

<input type="checkbox"/> Amendment	<input type="checkbox"/> Marked Up Claims/Spec.	<input type="checkbox"/> After Final Rejection
<input type="checkbox"/> Extension of Time/Extension Fee for _____ Months		
<input type="checkbox"/> Notice to File Missing Parts - Date _____		<input type="checkbox"/> Ltr to Draftsperson
<input type="checkbox"/> Notice to File Corrected App. Papers - Date _____		<input type="checkbox"/> Notice-Allowability
<input type="checkbox"/> Comb. Dec./POA	<input type="checkbox"/> Sht(s) Drawings	<input type="checkbox"/> Late Fee
<input type="checkbox"/> Issue Fee Transmittal (Form PTOL-85b)	<input type="checkbox"/> Sequence Listing _____ pages	
<input type="checkbox"/> Supp. Dec.	<input type="checkbox"/> Issue/Adv. Order fees	<input type="checkbox"/> Stmt in Comp. _____ Disk
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<input type="checkbox"/> Assignment to: _____		
<input checked="" type="checkbox"/> Transmittal Ltr. + <input checked="" type="checkbox"/> 1 2 copy(ies)		<input type="checkbox"/> Recordal Sheet
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